


**DELUXE**

CHECK PRINTERS, INC.  
615 McMICHAEL ROAD P.O. BOX 2852  
PITTSBURGH, PENNSYLVANIA 15230

Please print or type with ELITE type (12 characters/line) in the unshaded areas only.

EPA Form 3540-108 (Rev. 12/81)  
GSA No. 0246-EPA-07 Expiration Date 12/31/86

 <b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b> <b>NOTIFICATION OF HAZARDOUS WASTE ACTIVITY</b>		<b>INSTRUCTIONS:</b> If you received a preprinted label, affix it to the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by Section 3012 of the Resource Conservation and Recovery Act.
I. NAME OF INSTALLATION	PLEASE PLACE LABEL IN THIS SPACE	
II. INSTALLATION MAILING ADDRESS		
III. LOCATION OF INSTALLATION		

## FOR OFFICIAL USE ONLY

COMMENTS	
1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/> 9. <input type="checkbox"/> 10. <input type="checkbox"/> 11. <input type="checkbox"/> 12. <input type="checkbox"/> 13. <input type="checkbox"/> 14. <input type="checkbox"/> 15. <input type="checkbox"/> 16. <input type="checkbox"/> 17. <input type="checkbox"/> 18. <input type="checkbox"/> 19. <input type="checkbox"/> 20. <input type="checkbox"/> 21. <input type="checkbox"/> 22. <input type="checkbox"/> 23. <input type="checkbox"/> 24. <input type="checkbox"/> 25. <input type="checkbox"/> 26. <input type="checkbox"/> 27. <input type="checkbox"/> 28. <input type="checkbox"/> 29. <input type="checkbox"/> 30. <input type="checkbox"/> 31. <input type="checkbox"/> 32. <input type="checkbox"/> 33. <input type="checkbox"/> 34. <input type="checkbox"/> 35. <input type="checkbox"/> 36. <input type="checkbox"/> 37. <input type="checkbox"/> 38. <input type="checkbox"/> 39. <input type="checkbox"/> 40. <input type="checkbox"/> 41. <input type="checkbox"/> 42. <input type="checkbox"/> 43. <input type="checkbox"/> 44. <input type="checkbox"/> 45. <input type="checkbox"/> 46. <input type="checkbox"/> 47. <input type="checkbox"/> 48. <input type="checkbox"/> 49. <input type="checkbox"/> 50. <input type="checkbox"/> 51. <input type="checkbox"/> 52. <input type="checkbox"/> 53. <input type="checkbox"/> 54. <input type="checkbox"/> 55. <input type="checkbox"/> 56. <input type="checkbox"/> 57. <input type="checkbox"/> 58. <input type="checkbox"/> 59. <input type="checkbox"/> 60. <input type="checkbox"/> 61. <input type="checkbox"/> 62. <input type="checkbox"/> 63. <input type="checkbox"/> 64. <input type="checkbox"/> 65. <input type="checkbox"/> 66. <input type="checkbox"/> 67. <input type="checkbox"/> 68. <input type="checkbox"/> 69. <input type="checkbox"/> 70. <input type="checkbox"/> 71. <input type="checkbox"/> 72. <input type="checkbox"/> 73. <input type="checkbox"/> 74. <input type="checkbox"/> 75. <input type="checkbox"/> 76. <input type="checkbox"/> 77. <input type="checkbox"/> 78. <input type="checkbox"/> 79. <input type="checkbox"/> 80. <input type="checkbox"/> 81. <input type="checkbox"/> 82. <input type="checkbox"/> 83. <input type="checkbox"/> 84. <input type="checkbox"/> 85. <input type="checkbox"/> 86. <input type="checkbox"/> 87. <input type="checkbox"/> 88. <input type="checkbox"/> 89. <input type="checkbox"/> 90. <input type="checkbox"/> 91. <input type="checkbox"/> 92. <input type="checkbox"/> 93. <input type="checkbox"/> 94. <input type="checkbox"/> 95. <input type="checkbox"/> 96. <input type="checkbox"/> 97. <input type="checkbox"/> 98. <input type="checkbox"/> 99. <input type="checkbox"/> 100. <input type="checkbox"/>	

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DAYS RECEIVED
PAHUN 00322030		8/10/86

I. NAME OF INSTALLATION
DELUXE CHECK PRINTERS INC.

II. INSTALLATION MAILING ADDRESS	
STREET OR P.O. BOX	
P.O. Box 2852 RD 5 MCMICHAEL RD	

CITY OR TOWN	ST.	ZIP CODE
PITTSBURGH	PA	15230

III. LOCATION OF INSTALLATION	
STREET OR ROUTE NUMBER	
P.O. Box 2852 RD 5 MCMICHAEL RD	

CITY OR TOWN	ST.	ZIP CODE
PITTSBURGH	PA	15230

IV. INSTALLATION CONTACT	
NAME AND TITLE (Last, First, & Job Title)	
R. P. GENTRY PLANT MANAGER	

V. OWNERSHIP	
A. NAME OF INSTALLATION'S LEGAL OWNER	
DELUXE CHECK PRINTERS INC.	

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))	
F - FEDERAL M - NON-FEDERAL	<input checked="" type="checkbox"/> A. GENERATION <input type="checkbox"/> B. TRANSPORTATION (complete item VII) <input type="checkbox"/> C. TREAT/STORE/DISPOSE <input type="checkbox"/> D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))	
<input type="checkbox"/> A. AIR <input type="checkbox"/> B. RAIL <input checked="" type="checkbox"/> C. HIGHWAY <input type="checkbox"/> D. WATER <input type="checkbox"/> E. OTHER (specify)	

VIII. FIRST OR SUBSEQUENT NOTIFICATION	
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.	

<input checked="" type="checkbox"/> A. FIRST NOTIFICATION <input type="checkbox"/> B. SUBSEQUENT NOTIFICATION (complete item C)	C. INSTALLATION'S EPA I.D. NO. _____
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IX. DESCRIPTION OF HAZARDOUS WASTE	
Please go to the reverse of this form and provide the requested information.	

## IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F001	F002	F003	F005		
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.31 - 261.34.)

☐ I. IGNITABLE  
(D001)

☐ II. CORROSIVE  
(D002)

☐ III. REACTIVE  
(D003)

☐ IV. TOXIC  
(D004)

## X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

R. P. Gentry

NAME &amp; OFFICIAL TITLE (type or print)

R.P. GENTRY, PLANT MANAGER

DATE SIGNED

9-11-85

 RECEIVED  
PA SECTION

SEP 19 1985

EPA, R3



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

PA0002327930

INSTALLATION ADDRESS

GENTRY, R P PLT MGR  
DELUXE CHECK PRINTERS INC  
PO BOX 2852 RD S MCMICHAEL RD  
PITTSBURGH PA 15230  
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